

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 153

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Community Pharmacists Association - PAC

A.

Full Name (Last, First, Middle Initial)

Tammy S. Stutes

Mailing Address 2509 Charity St.

City

Abbeville

State

LA

Zip Code

70510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cashway Pharmacy of Abbeville

Occupation

Owner/Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 9

Transaction ID: 20090921_007118

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Robert J. Sumner

Mailing Address 8015 W Alameda Ave Ste 100

City

Lakewood

State

CO

Zip Code

80226-3075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Union Square Pharmacy At Bellmar

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 9

Transaction ID: 20090921_013072

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

John G. Sutter

Mailing Address 620 Washington St

City

Horicon

State

WI

Zip Code

53032-1587

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marshland Pharmacy

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 1 / 2 0 0 9

Transaction ID: 20090921_011225

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)